

**BEST AVAILABLE COPY**

POSITION	INITIALS	NO NO.	DATE
FEE DETERMINATION	<i>BA</i>	<i>70385</i>	
O.I.P.E. CLASSIFIER		<i>49</i>	<i>8/6/99</i>
FORMALITY REVIEW	<i>DMIL</i>	<i>69165</i>	<i>8-16-99</i>
	<i>"</i>	<i>"</i>	<i>10-12-99</i>

**INDEX OF CLAIMS**

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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